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February 5, 2004

TO: Examiner Holleran (TC1600)

GROUP: 1642

FAX NUMBER: 703-872-9307

ATTORNEY DOCKET NO.: DEX-0180

SERIAL NO.: 09/806,302

FILED: July 19, 2001

NUMBER OF PAGES: 14

MESSAGE: Attached please find Amendment Transmittal Letter; Reply under 37 C.F.R. 1.116 mailed November 5, 2003 with three (3) attachments; via Certificate of Transmission by Facsimile.

Kathleen A. Tyrrell, Registration No. 38,350

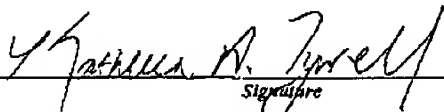
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| | | | | | |
|---|-------------------------------------|--------------------------------------|---|-------------------------------|-------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | | Docket No. DEX-0180 | |
| Applicant(s): Roberto A. Macina | | | | | |
| Serial No. 09/806,302 | Filing Date July 19, 2001 | Examiner Holleran, Anne L. | | Group Art Unit 1642 | |
| Invention: A Novel Method of Diagnosing, Monitoring, Staging, Imaging and Treating Gynecologic Cancer | | | | | |
| <u>TO THE COMMISSIONER FOR PATENTS:</u> | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 1 - | 20 = | 0 x | \$18.00 | \$0.00 |
| INDEP. CLAIMS | 1 - | 7 = | 0 x | \$84.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. | | | | | |
|  Signature Kathleen A. Tyrrell, Registration No. 38,350 | | | Dated: February 5, 2004 | | |
| LICATA & TYRRELL P.C. 66 East Main Street Marlton, New Jersey 08053 Tel : 856-810-1515 Fax: 856-810-1454 | | | <div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1460, Alexandria, VA 22313-1450. </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Typed or Printed Name of Person Mailing Correspondence </div> | | |
| cc: | | | | | |

P11LARGE/REV08